## Harnett County Department of Public Health

## Improvement Permit

	PROPERTY LOCATION: 284 OAK GROVE CH. 25 (51	1532)
ISSUED TO: KEITH Bread	SUBDIVISION	
NEW □ REPAIR □ EXPANSION □	Site Improvements required prior to Construction Authorization Issuance	e:
Type of Structure: 3-BEDICON 47'X3D' 575		
Proposed Wastewater System Type: 25% newstrom Sts., Projected Daily Flow: 366 GPD		
Number of bedrooms: 3 Number of Occupants: 6	vem	
Basement Ves No	IIIAA	
Pump Required: Yes A No May be required based on final to	cation and elevations of facilities	
Type of Water Supply: Community Public Well Distan		ears
Permit conditions:	No ex	
Lange Mall	2 02/10/2022	FTCII
Authorized State Agent:	permits. The permit holder is responsible for checking with appropriate governing bodies in meeting their req	
	permits, the permit horder is responsible for checking with appropriate governing bodies in meeting their req Permit shall not be affected by a change in ownership of the site. This permit is subject to compliance with ti	
the Laws and Rules for Sewage Treatment and Disposal and to conditions of this permit.		
Constru	uction Authorization	
	uired for Building Permit)	
The construction and installation requirements of Rules 1950, 1952, 1954, 1955, 1956, 1957, with the attached system layout.	1958, and .1959 are incorporated by references into this permit and shall be met. Systems shall be installed	in accordance
ISSUED TO: KEITH BROWN	PROPERTY LOCATION: 2841 GAKGROUTE CH 15 (	5-21532
	SUBDIVISION LOT #	4
Facility Type: 382 47'X32' ST		
Basement? Yes 🖎 No Basement Fixtures? Tyes	□ No	
	Store (Initial) Wastewater Flow: 360	GPD
(See note below, if applicable 🔲)		
25% NEDUTIONS	to all the second	
Installation Requirements/Conditions Number of trench	es3	
	ach trench <u>80</u> feet Trench Spacing: Feet on Cen	ter
8	installed on contour at a Soil Cover:inches	
Maximum Trench	Depth of:inches (Maximum soil cover shall not exceed	
(Trench bottoms	shall be level to +/-1/4" 36" above the trench bottom)	
in all directions)		
Pump Requirements:ft. TDH vsGPM	inches	below pipe
	Aggregate Depth: inches	above pipe
Conditions:	~A	inches total
WATER LINES (INCLUDING IRRIGATION) MUST BE 10FT. FROM AN	IY PART OF SEPTIC SYSTEM OR REPAIR AREA.	
NO UTILITIES ALLOWED IN INITIAL OR REPAIR DRAIN FIELD AREA	•	
**   applicable:   understand the system type specified is different from t	he type specified on the application. I accept the specifications of this permit.	
- apprease. I understand the system type specified is directly from the	to type specimes on the appreasion. I accept the specimeations of this perime.	
Owner/Legal Representative Signature:	Date:	
This Construction Authorization is subject to revocation if the site plan, plat, or the intended use c	hanges. The Construction Authorization shall not be transferred when there is a change in ownership of the sit	e. This
Construction Authorization is subject to compliance with the provisions of the Laws and Rules for S	ewage Treatment and Disposal and to the conditions of this permit.	E SKETCH
Authorized State Agent:	uction Authorization Expiration Date: 07/10/2025	
	uction Authorization Expiration Date: 07/10/2025	

## Harnett County Department of Public Health Site Sketch

